## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>02/16/10</u>	Address:	7060 S 300 W
Case #:	<u>14-39668</u>		Boswell, IN
County:	Benton	·	<u>47921</u>
Type of Laboratory Seizure (check one) Seizure Location (check all the			check all that apply)
Chemic	onal Lab cal/Glassware/Equipment (only) ite (only)	☐ Residence ☐ Outbuilding ☐ Vehicle	☐ Hotel/Motel ☐ Open — No Structure ☐ Other:
Items Four	nd: Location (bedroom, kitchen, open ai	r, etc)	
(check all that apply)  Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents:			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s):			
Corrosive Acid:			
Corrosive Base: Outbuilding			
Other (i	item and location):		
Yes _ No	er age 18 discovered (check one) (number present) eport to Child Protective Services	☐ Ephedrir ☐ Retail/M	re Information ne/Pseudoephedrine Tracking Log erchant Tip enton County Sheriff
This repor	t is to be faxed to the following ager	ncies that serve the l	ocation:
Health Dep	tment: <u>Boswell-Grant VFD</u> partment: <u>Benton County</u> ection Service: <u>NA</u>	Fax: <u>765-8</u> Fax: <u>765-8</u> Fax:	<u> 384-2026</u>
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Brock Russell Phone 765-567-2125			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.